**COMBINED DECLARATION AND POWER OF ATTORNEY****(Original, Design, National Stage of PCT, Divisional, Continuation or C-I-P Application)**

As a below named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated below next to my name; I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

**MOUSE OLFACTORY RECEPTOR GENE SUPERFAMILY**

This declaration is of the following type:

- ☐ original
- ☐ design
- ☐ national stage of
- ☐ divisional
- ☒ continuation
- ☐ continuation-in-part (C-I-P)

the specification of which: *(complete (a), (b), or (c))*

(a) ☐ is attached hereto.

(b) ☒ was filed February 6, 2004 as U.S. Application Serial No.10/774,355.

(c) ☐ was described and claimed in PCT International Application No. filed on and was amended on *(if applicable)*.

**Acknowledgement of Review of Papers and Duty of Candor**

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment referred to above.

I acknowledge the duty to disclose information which is material to the patentability of the subject matter claimed in this application in accordance with Title 37, Code of Federal Regulations § 1.56.

☐ In compliance with this duty there is attached an information disclosure statement. 37 CFR 1.98.

**Priority Claim**

I hereby claim foreign priority benefits under Title 35, United States Code, § 119(a)-(d) of any foreign application(s) for patent or inventor's certificate or of any PCT International Application(s) designating at least one country other than the United States of America listed below and have also identified below any foreign application(s) for patent or inventor's certificate or any PCT International Application(s) designating at least one country other than the United States of America filed by me on the same subject matter having a filing date before that of the application on which priority is claimed

*(complete (d) or (e))*

(d) ☐ no such applications have been filed.

(e) ☒ such applications have been filed as follows:

PRIOR FOREIGN/PCT APPLICATION(S) FILED WITHIN 12 MONTHS (6 MONTHS FOR DESIGN) PRIOR TO SAID APPLICATION			
COUNTRY	APPLICATION NO.	DATE OF FILING (day, month, year)	DATE OF ISSUE (day, month, year)
			PRIORITY CLAIMED UNDER 35 USC 119 <input type="checkbox"/> YES NO <input type="checkbox"/>
			<input type="checkbox"/> YES NO <input type="checkbox"/>
ALL FOREIGN APPLICATION(S), IF ANY, FILED MORE THAN 12 MONTHS (6 MONTHS FOR DESIGN) PRIOR TO SAID APPLICATION			
			<input type="checkbox"/> YES NO <input type="checkbox"/>
			<input type="checkbox"/> YES NO <input type="checkbox"/>

### Claim for Benefit of Prior U.S. Provisional Application(s)

I hereby claim the benefit under Title 35, United States Code, § 119(e) of any United States provisional application(s) listed below:

Provisional Application Number	Filing Date
60/311,159	August 9, 2001
60/339,694	December 12, 2001

### Claim for Benefit of Earlier U.S./PCT Application(s) under 35 U.S.C. 120

*(complete this part only if this is a divisional, continuation or C-I-P application)*

I hereby claim the benefit under Title 35, United States Code, § 120 of any United States application(s) or PCT international application(s) designating the United States of America that is/are listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior application(s) in the manner provided by the first paragraph of Title 35, United States Code § 112, I acknowledge the duty to disclose information as defined in Title 37, Code of Federal Regulations, § 1.56 which occurred between the filing date of the prior application(s) and the national or PCT international filing date of this application:

<u>PCT/US02/25556</u>	<u>August 9, 2002</u>	<u>Pending</u>
(Application Serial No.)	(Filing Date)	(Status) (patented, pending, abandoned)
 (Application Serial No.)	 (Filing Date)	 (Status) (patented, pending, abandoned)

### Power of Attorney

As a named inventor, I hereby appoint Robert C. Scheinfeld, Reg. No. 31,300; Rochelle K. Seide, Reg. No. 32,300; Gary M. Butter, Reg. No. 33,841; Lisa B. Kole, Reg. No. 35,225; Paul A. Ragusa, Reg. No. 38,587; Walter M. Egbert, Reg. No. 37,317; Paul D. Ackerman, Reg. No. 39,891; Carmella L. Stephens, Reg. No. 41,328 and Peter J. Shen, Reg. No. 52,217 of the firm of BAKER BOTTS L.L.P., with offices at 30 Rockefeller Plaza, New York, New York 10112, as attorneys to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith

SEND CORRESPONDENCE TO: BAKER BOTTS L.L.P. 30 ROCKEFELLER PLAZA, NEW YORK, N.Y. 10112 CUSTOMER NUMBER: 21003	DIRECT TELEPHONE CALLS TO: BAKER BOTTS L.L.P. (212) 408-2500
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I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

FULL NAME OF FIRST INVENTOR	LAST NAME Firestein	FIRST NAME Stuart	MIDDLE NAME	
RESIDENCE & CITIZENSHIP	CITY New Milford	STATE or FOREIGN COUNTRY Conn.	COUNTRY OF CITIZENSHIP U.S.	
POST OFFICE ADDRESS	POST OFFICE ADDRESS 35 Ferriss Estate	CITY New Milford	STATE or COUNTRY Conn.	ZIP CODE 06776
DATE 10/15/04	SIGNATURE OF FIRST INVENTOR <i>Stuart Firestein</i>			
FULL NAME OF SECOND JOINT INVENTOR, IF ANY	LAST NAME Zhang	FIRST NAME Xinmin	MIDDLE NAME	
RESIDENCE & CITIZENSHIP	CITY Carlsbad	STATE or FOREIGN COUNTRY Ca	COUNTRY OF CITIZENSHIP China	
POST OFFICE ADDRESS	POST OFFICE ADDRESS 2835 Unicornio Street, #B	CITY Carlsbad	STATE or COUNTRY Ca	ZIP CODE 92009
DATE	SIGNATURE OF SECOND INVENTOR			
FULL NAME OF THIRD JOINT INVENTOR, IF ANY	LAST NAME	FIRST NAME	MIDDLE NAME	
RESIDENCE & CITIZENSHIP	CITY	STATE or FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP	
POST OFFICE ADDRESS	POST OFFICE ADDRESS	CITY	STATE or COUNTRY	ZIP CODE
DATE	SIGNATURE OF THIRD INVENTOR			
FULL NAME OF FOURTH JOINT INVENTOR, IF ANY	LAST NAME	FIRST NAME	MIDDLE NAME	
RESIDENCE & CITIZENSHIP	CITY	STATE or FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP	
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DATE	SIGNATURE OF FOURTH INVENTOR			

Check proper box(es) for any added page(s) forming a part of this declaration

- ☐ Signature for fifth and subsequent joint inventors. Number of pages added \_\_\_\_\_.
- ☐ Signature by administrator(trix), executor(trix) or legal representative for deceased or incapacitated inventor.  
Number of pages added \_\_\_\_\_.
- ☐ Signature for inventor who refuses to sign, or cannot be reached, by person authorized under 37 CFR 1.47.  
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PCT/US02/25556

August 9, 2002

Pending

(Application Serial No.)

(Filing Date)

(Status) (patented, pending, abandoned)

(Application Serial No.)

(Filing Date)

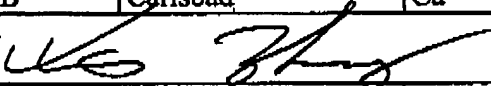
(Status) (patented, pending, abandoned)

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POST OFFICE ADDRESS	POST OFFICE ADDRESS 35 Ferriss Estate	CITY New Milford	STATE or COUNTRY Conn.	ZIP CODE 06776
DATE	SIGNATURE OF FIRST INVENTOR			
FULL NAME OF SECOND JOINT INVENTOR, IF ANY	LAST NAME Zhang	FIRST NAME Xinmin	MIDDLE NAME	
RESIDENCE & CITIZENSHIP	CITY Carlsbad	STATE or FOREIGN COUNTRY Ca	COUNTRY OF CITIZENSHIP China	
POST OFFICE ADDRESS	POST OFFICE ADDRESS 2835 Unicornio Street, #B	CITY Carlsbad	STATE or COUNTRY Ca	ZIP CODE 92009
DATE 08/17/04	SIGNATURE OF SECOND INVENTOR 			
FULL NAME OF THIRD JOINT INVENTOR, IF ANY	LAST NAME	FIRST NAME	MIDDLE NAME	
RESIDENCE & CITIZENSHIP	CITY	STATE or FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP	
POST OFFICE ADDRESS	POST OFFICE ADDRESS	CITY	STATE or COUNTRY	ZIP CODE
DATE	SIGNATURE OF THIRD INVENTOR			
FULL NAME OF FOURTH JOINT INVENTOR, IF ANY	LAST NAME	FIRST NAME	MIDDLE NAME	
RESIDENCE & CITIZENSHIP	CITY	STATE or FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP	
POST OFFICE ADDRESS	POST OFFICE ADDRESS	CITY	STATE or COUNTRY	ZIP CODE
DATE	SIGNATURE OF FOURTH INVENTOR			

Check proper box(es) for any added page(s) forming a part of this declaration

- ☐ Signature for fifth and subsequent joint inventors. Number of pages added \_\_\_\_\_.
- ☐ Signature by administrator(trix), executor(trix) or legal representative for deceased or incapacitated inventor.  
Number of pages added \_\_\_\_\_.
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